

Know your customer – company

Information sheet

When to use this form

Use this form to provide the information we need to verify the company's identity and to meet our legal obligations (including those under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*).

Verifying a customer's identity

We need to verify or confirm your identity by checking that certain details you provide in this form **match** the details that are in certain documents you need to attach to this form.



Please send us **original certified copies** of your original documents—don't send us the original documents.

If the document is not written in English, then you must also attach an English translation prepared by an accredited translator.

Getting your copies certified

A copy of a document must be certified to be a true and correct copy of the original document. Only certain people can certify copies including:

- police officer or sheriff
- justice of the peace or notary public
- legal practitioner, magistrate, judge or registrar/deputy registrar of a court
- pharmacist, physiotherapist or veterinary surgeon
- optometrist, dentist, medical practitioner or nurse
- member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practicing Accountants or the National Institute of Accountants.

You can see the full list of people who can certify documents or extracts at **resolutionlife.com.au/identification**.

Example:

I certify that this is a true and correct copy of the original document.

John Citizen

John Citizen, Justice of the Peace 10 Other Street Suburb NSW 2000

02 9999 9999 10 July 2025

Documents for a company

The document you need to send us depends on the type of company:

Australian company

- certificate of registration issued by ASIC.

Foreign company registered by ASIC

Both of these:

- certificate of registration issued by ASIC; and
- company extract issued from relevant foreign registration body.

Foreign company not registered by ASIC

 certificate of registration issued by the relevant foreign registration body.

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Documents for any beneficial owner or controlling person

So we can verify the identity of any beneficial owner or controlling person you listed in the form, you need to send us the documents shown under option A or B:

Option A

One of these:

- current Australian state or territory driver licence that has your photo
- Australian passport that is current or expired within the last two years
- card issued under a state or territory law to prove your age that has your photo
- current foreign government passport (or similar international travel document) that has your photo and signature
- current foreign driver licence that has your photo
- current national identity card that has your photo.

Option B

One of these:

- Australian or foreign birth certificate
- Australian or foreign citizenship certificate
- birth certificate extract
- pension card issued by Department of Human Services
- health card issued by Department of Human Services.

Plus



The documents listed below are only valid if they include your full name and residential address.

One of these:

- a document issued by the Commonwealth or a state or territory within the last 12 months that shows financial benefits paid to you
- a document issued by the Australian Taxation Office within the last 12 months that shows money to be paid to you or that you need to pay to them (make sure you cross out your TFN)
- a document issued by a local government body or utility provider within the last three months that shows the services provided to you at your address
- if you're under 18 years old, a notice issued by a school principal within the last three months that shows how long you attended that school.

Privacy – use and disclosure of personal information

The privacy of your personal information is important to us.

We collect and hold personal information about you so we can provide you with financial products and services and assist you with your ongoing financial needs. If we do not collect this information, we may not be able to provide you with these products and services. We may also use your personal information for other purposes, such as enhancing our customer service and product options, and to inform you of opportunities which may be beneficial to you via direct marketing. Please contact us if you do not want to receive this information.

We may exchange your personal information with Resolution Life's related bodies corporate (as defined in s50 Corporations Act 2001 (Cth)), as further explained in the Resolution Life Privacy Policy. We may also provide information to local and overseas entities which provide Resolution Life with administrative, financial, research or other services, other insurers and credit providers, financial advisers, brokers and other organisations authorised by Resolution Life to assist in reviewing customer needs. A list of countries where these providers are likely to be located can be accessed via our privacy policy.

We may also disclose personal information to courts, tribunals and disputes resolution bodies, government agencies, and other bodies we are required to provide information to under the law.

The Resolution Life privacy policy (available at **resolutionlife.com.au**) provides more information about how we manage and protect your personal information. It sets out how you can access and correct your information, how you may complain about a breach of privacy and our process for resolving privacy related enquiries and complaints.

Definitions

Resolution Life approved financial market

A full list of Resolution Life approved financial markets is available at **resolutionlife.com.au/identification**.

Australian public listed company

Australian companies that are listed on an Resolution Life approved financial market such as the ASX.

Beneficial owner

A beneficial owner is an individual who ultimately own 25% or more of the company's capital issued to shareholders (through direct or indirect shareholdings).

Controlling Person

A controlling person is an individual who controls the company through:

- the authority to make decisions about financial or operating policies, or
- voting rights of 25% or more, or
- power of veto, or
- by way of trusts, agreements and practices.

If the controlling person can't be identified, you need to provide us with the details of the most senior official(s) (eg managing director).

Foreign public listed company

Companies that are subject to disclosure requirements that ensure transparency of beneficial ownership comparable to similar public listing requirements in Australia. Refers to listing on an Resolution Life approved financial market that by stock exchange rules, law or enforceable means promotes transparency of beneficial owner information.

Majority owned subsidiary of an Australian public listed company

Companies that are majority owned by an Australian company that is listed on an Resolution Life approved financial market such as the ASX.

Regulated company

Companies subject to the supervision of an Australian Commonwealth, state or territory statutory regulator beyond that provided by ASIC as a company registration body. For example, Australian Financial Services Licensees (AFSL); Australian Credit Licensees (ACL) or Registrable Superannuation Entity (RSE) Licensees.

This document is issued by Equity Trustees Superannuation Limited (ETSL) ABN 50 055 641 757, AFSL No. 229757 as trustee of the National Mutual Retirement Fund (NMRF) ABN 76 746 741 299 and was prepared by Resolution Life Australasia Limited ABN 84 079 300 379 (Resolution Life).

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Please keep this information sheet for your records—don't return it with your completed form(s).



Know your customer – company

Use this form to provide the information we need to verify the company's identity and to meet our legal obligations (including those under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006).

Note: You should only use this form for a company. A different form applies for an individual, sole trader, trust or other organisation.

Please print in CAPITAL LETTERS and place a cross x in any applicable boxes.

| 1. What you need to do | | |
|--|--|--|
| Are you completing this form for an Australian or foreign company? Australian company > Complete sections 1–3, and 6–11 Foreign company registered by ASIC > Complete sections 1, 2, 4, and 6–11 Foreign company not registered by ASIC > Complete sections 1, 2 and 5–11 | | |
| Products held and company name – all companies Please provide the plan/policy/member/account number | 3. Australian company (continued) Principal place of business address | |
| for products you hold with Resolution Life or any other reference number: | Does your company have a principal place of business address? ☐ No | |
| Full company name (as registered by ASIC or an equivalent foreign registration body) | Yes, it's the same as the registered office address Yes, it's different to the registered office address— provide details below: Address (PO Box is not acceptable) | |
| Where was the company formed/incorporated/registered? Australia Other – provide details below: Name of country | Suburb State Postcode Country | |
| Australian company Australian company number (ACN) | 4. Foreign company registered by ASIC | |
| Registered office address | Australian registered body number (ARBN) | |
| Address (PO Box is not acceptable) | Is the company registered with a foreign registration body? ☐ No ☐ Yes—provide details below: Name of foreign registration body | |
| Suburb State Postcode | Identification number issued by foreign registration body | |
| Country | | |

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4. Foreign company registered by ASIC (continued)

| Registered office address in Australia | registration t |
|--|---------------------------|
| Address (PO Box is not acceptable) | was formed/ |
| | Address (PC |
| | |
| Suburb State Postcode | |
| | Suburb |
| Country | |
| | Country |
| | |
| Principal place of business address in Australia or local agent | 6. Director |
| Does the company have a principal place of business | |
| address in Australia? | Complete - Austra |
| ☐ Yes, it's the same as the registered office address in Australia | foreigr |
| ☐ Yes, it's different to the registered office address in | – foreigr |
| Australia—provide details below: | How many dire |
| ☐ No, I have a local agent—provide details below: Full name of local agent (if relevant) | |
| an name of recar agont (in relevant) | Please provide |
| Address (PO Box is not acceptable) | has more than |
| | directors on a s |
| | Director 1 |
| Suburb State Postcode | Title |
| | |
| Country | Surname |
| | |
| - 1 11 122 | Given name(s) |
| 5. Foreign company not registered by ASIC | |
| Is the company registered with a foreign registration body? | Director 2 |
| No—provide details below: | Title |
| The principal place of business address in the country where the company was formed/incorporated: | |
| Address (PO Box is not acceptable) | Surname |
| | |
| | Given name(s) |
| Suburb State Postcode | |
| | |
| Country | Director 3 |
| | Title |
| Yes—provide details below: | |
| Name of foreign registration body | Surname |
| | |
| Identification number issued by foreign registration body | Given name(s) |
| | |
| i e e e e e e e e e e e e e e e e e e e | |

5. Foreign company not registered by ASIC (continued)

registered office address held by the foreign stration body in the country where the company formed/incorporated/registered: ress (PO Box is not acceptable) urb State Postcode ntry irectors Complete this section if your company is: Australian proprietary foreign private, or foreign other (not a public or private company). any directors does your company have? provide the name of each director (if your company ore than four directors, attach details of additional rs on a separate sheet): ctor 1 ne name(s) tor 2 ne name(s) ctor 3 ne

6. Directors (continued) 8. Beneficial owners List the people who ultimately own 25% or more of the **Director 4** company's capital issued to shareholders (through direct Title or indirect shareholdings). You'll also need to attach a certified copy of identification documents for each person listed. Refer to the **information** Surname sheet for details. Does your company have any beneficial owners? Given name(s) ☐ No—go to section 9 ☐ Yes—provide details below for each beneficial owner: 7. Other details – all companies Beneficial owner 1 Title Date of birth To find out more about the types of company categories and an Resolution Life approved exchange, refer to the definitions in the information sheet. Surname Which of these categories describes your company? ☐ Australian public listed—provide details below: Given name(s) Name of financial market company is listed on Gender ☐ Male ☐ Female ☐ Other ☐ Foreign public listed—provide details below: Name of financial market company is listed on Residential address (PO Box is not acceptable) Country of financial market Suburb State Postcode ☐ Majority owned subsidiary of an Australian public listed company—provide details below: Country Name of the Australian public listed company Beneficial owner 2 Name of financial market Australian company is listed on Title Date of birth Regulated company—provide details below: Surname Name of regulator Given name(s) Licence details Gender Licence number ☐ Male ☐ Female ☐ Other Residential address (PO Box is not acceptable) ☐ Other—go to section 8. Is your company either listed on an Resolution Life approved exchange or is it regulated? ☐ No—go to section 8. Suburb State Postcode \square Yes—go to section **10**. Country

8. Beneficial owners (continued) 9. Controlling persons (continued) Note: A person may control the company through: the Beneficial owner 3 authority to make decisions about financial or operating Title Date of birth policies; voting rights of 25% or more; power of veto; or, by way of trusts, agreements and practices. If this person can't be identified, provide details of the most senior official(s), Surname such as a managing director. Controlling person 1 Given name(s) Role Gender Date of birth Title ☐ Male ☐ Female ☐ Other Residential address (PO Box is not acceptable) Surname Given name(s) Suburb State Postcode Gender Country ☐ Male ☐ Female ☐ Other Residential address (PO Box is not acceptable) Beneficial owner 4 Title Date of birth Suburb State Postcode Surname Country Given name(s) Controlling person 2 Gender Role ☐ Male ☐ Female ☐ Other Residential address (PO Box is not acceptable) Title Date of birth Surname Suburb State Postcode Given name(s) Country Gender ☐ Male ☐ Female ☐ Other 9. Controlling persons Residential address (PO Box is not acceptable) Complete this section if you didn't list any beneficial owners in section 8. List the people who directly or indirectly control Suburb State Postcode your company. You'll also need to attach a certified copy of identification documents for each person listed. Refer to the information Country sheet for details.

9. Controlling persons (continued) 10. Customer declaration - all companies These declarations are given by the company named in Controlling person 3 section 2 and by any signatories signing this form. Role I understand that it's a criminal offence to knowingly provide: - information in this form that is false or misleading Title Date of birth - false documents to support this form. I declare that the information in this form and in any Surname supporting document: is complete and correct Given name(s) - that is about another person has been provided with their consent (if required) - may be used for any product, service or benefit that I hold, Gender apply for, request or obtain ☐ Male ☐ Female ☐ Other - may be disclosed to and used by the provider of the product, service or benefit in line with their privacy Residential address (PO Box is not acceptable) obligations to comply with anti-money laundering and counter-terrorism financing legislation. Note: Anyone authorised to sign or transact on behalf of the company must be appointed in line with the relevant Suburb State Postcode application form, product disclosure statement or other disclosure document. Country Signatory 1 Name **Controlling person 4** Signature Role X Title Date of birth Date Surname Signatory 2 Given name(s) Name Gender Signature ☐ Male ☐ Female ☐ Other X Residential address (PO Box is not acceptable) Date Suburb State Postcode Country

| 11. Checklist – all companies |
|--|
| ☐ Have you completed all relevant sections of this form? |
| $\hfill\Box$ Have you read and understood the declaration in section $\bf 10$ and signed and dated that section? |
| ☐ If your company has more than four directors, have you attached a separate sheet with the name details for the other directors? |
| ☐ Have you attached original certified copies of documents to verify the identity of your company as set out in the information sheet ? |
| ☐ Have you attached original certified copies of documents to verify the identity of any beneficial owner or controlling person that you listed in this form as set out in the information sheet? |

| Financial adviser and office use | | |
|--------------------------------------|----------------------|--|
| Request ID | Financial adviser ID | |
| | | |
| Financial adviser name | | |
| | | |
| Customer identification verified by: | | |
| ☐ Originals | | |
| ☐ Original certified copies | | |
| ☐ Register search | | |
| \square Attached documents | | |